



**Pediatric Neurology Part I: Chapter 72.
Problematic behavior in children with epilepsy:
issues and management (Handbook of Clinical
Neurology)**

David Taylor, Frank Besag

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This chapter is written on the premise the neurologist who will take on a new case of epilepsy or will have behavioral problems arise in an old case. “behavioral problems” is preferred to “psychiatric disorders” because the behavior is described by the parents and can be evident to the neurologist. All “behavior” is organized in the brain and can be dysfunctional if cerebral function is impaired by lesions, by genetic aberrations, or by medications. Epilepsy is also liable to give rise to prejudicial responses in all concerned. A detailed history of the family unit is essential from the start. The “illness” of epilepsy will arise from structural “disease” and will give rise to a painful “predicament”; anguish, distress. And all this is in a particular context. The best possible solution for the child will have to be “negotiated,” rather than prescribed. Psychopathology also arises from “everyday life”; from the fact of chronic illness; and from alienation. These aspects are explored in detail. Mental handicap, specific learning difficulties, ADHD, and autism are frequently specifically associated with epilepsy.

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